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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/537,824	02/08/2006	Marcello Allegretti	3765-0115PUS1	8576
	7590 01/14/200 ART KOLASCH & BI	EXAMINER		
PO BOX 747			LOEWE, SUN JAE Y	
FALLS CHURCH, VA 22040-0747			ART UNIT	PAPER NUMBER
			1626	
			NOTIFICATION DATE	DELIVERY MODE
			01/14/2009	ELECTRONIC

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

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Interview Summary	0/537,824 ALLEGRETTI ET AL.		
interview Summary	Examiner	Art Unit	
	SUN JAE Y. LOEWE	1626	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>SUN JAE Y. LOEWE</u> .	(3)		
(2) <u>MARK NUELL</u> .	(4)		
Date of Interview: <u>1-8-2009</u> .			
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	2)∏ applicant's representative	;]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: <u>na</u> .			
Identification of prior art discussed: <u>na</u> .			
Agreement with respect to the claims f) was reached. g)∏ was not reached. h)⊠ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>no response filed</u> .	nature of what was agreed to	if an agreement	was
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW DATE, OR THE SUBSTANCE OF THE INTERVIEW ON THE SUBSTANCE OF THE SUBSTANCE OF THE SUBSTANCE OF THE INTERVIEW ON THE SUBSTANCE OF T	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, '	been filed, APP OAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO

Application No.

Applicant(s)